



MOUNT WAVERLEY
HEIGHTS
PRIMARY SCHOOL

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Wednesday 11th of November

Dear Year 5 Parents,

Year 5 Excursion to Scienceworks

As part of the Year 5 Science curriculum we will be visiting Scienceworks on Tuesday the 6th of December. The students will be involved in the "Test Lab" program as well as enjoy "Visual Illusions" and a planetarium show "Tilt". "Test Lab" gives the students the opportunity to be inspired, test their creativity and engage with the design process. "Visual Illusions" will test the students' knowledge that seeing is not always believing. "Tilt" shows students how the four seasons are caused by the tilt of the Earth's axis combined with the Earth's orbit around the Sun and how the seasons and length of day vary across the Earth, from the poles to the equator. All of these activities cover curriculum topics including *Science as a Human Endeavour, the Solar System and Creativity, Design and Technology*.

DATE:	Tuesday 6 th of December
TIME:	Depart school at 9:00am and return to school by around 3:00pm
COST:	Covered by excursion levy
VENUE:	Scienceworks, 2 Booker Street Spotswood
REQUIREMENTS:	School Uniform Packed playlunch and lunch in a small backpack Drink bottle of water (named) Asthma medication (if required) Epipen (if required)

Please arrive at school by 8:45am as the bus will leave at 9:00am.

Please complete the permission form attached to this letter and return to school by Friday 2nd of December 2016.

Kind Regards,

Lindsay Hannah & Sandra Douglas
Year 5/6 Classroom Teachers

Year 5 Excursion to Scienceworks - Permission/Medical Form

TITLE: Year 5/6 Excursion to Scienceworks

DATE: 06-12-2016

I give permission for my child to travel by bus to Scienceworks on Tuesday the 6th of December 2016. I authorise the teacher in charge of the excursion to consent, where it is impractical to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary. I understand that the Department of Early Childhood Education & Development (DEECD) does not provide student accident cover insurance.

Student's Full Name: _____ Class: _____ Date of Birth ___/___/___

PLEASE TICK IF YOUR CHILD SUFFERS ANY OF THE FOLLOWING:

Fits of any type <input type="checkbox"/>	Blackouts <input type="checkbox"/>	Travel Sickness <input type="checkbox"/>	Dizziness <input type="checkbox"/>
Migraines <input type="checkbox"/>	Asthma <input type="checkbox"/> (If your child has asthma, regardless of the frequency, a copy of a current asthma plan must be attached . Ventolin, or other prescribed medication, must be carried by your child or staff on this excursion.)	Allergy (e.g. bee/wasp, nuts, Penicillin, other) <input type="checkbox"/> Allergic to: _____ Epipen: Y <input type="checkbox"/> N <input type="checkbox"/>	
Other <input type="checkbox"/> please specify: _____			

NB: Please ensure the school has a current Asthma Management Plan or Anaphylaxis Plan. (If applicable)

Special care is recommended: _____

Is your child currently taking any medications? Yes / No

If yes, please state the name of and dosage of medications: _____

Emergency name: _____ Emergency contact number on the day: _____

Emergency Contacts are people that Sussex Primary School may need to contact in an emergency. Please ensure that the people named are aware that they have been nominated as emergency contacts and agree to their details being provided to Sussex Heights Primary School.

Parent's Name: _____ Signature: _____ Date: _____

This confidential form asks for personal information about your child. The main purpose for collecting this information is so that Mount Waverley Heights Primary School can allocate staff for supervision and it assists us to properly care for your child. The school depends on you to provide all relevant health information. Withholding some health information may put your child's health at risk. The school will use this information if your child is involved in a medical emergency. This medical form must be current when the excursion is run. Parents are responsible for all medical costs if a student is injured on a school approved excursion unless the Department of Education and Early Childhood Development is found liable (liability is not automatic). Parents can purchase student accident insurance cover from a commercial insurer if they wish to. All staff at Sussex Heights Primary School and the Department of Education & Early Childhood Development are required by law to protect the information provided on this form. All information is held in confidence.